



## FIRST 5 COUNTY COMMISSIONS FEDERAL FUNDS LEVERAGED

*Reported funds based on programs in effect 2008-2009\**

Type of Federal Funds	Number of County Commissions Leveraging	Total Leveraged in 2008-2009
Medi-Cal Administrative Activities (MAA)	28	\$ 11,311,959
Targeted Case Management (TCM)	12	6,515,702
Early Periodic Screening, Diagnosis, and Treatment (EPSDT)	14	11,578,468
Title IV – E (Child Welfare Services)	6	2,253,393
Head Start / Early Head Start	8	16,319,512
AmeriCorps	16	2,105,245
Other Federal Sources (including VISTA, Medi-Cal services, emergency shelter grants, TANF ECF, SAMHSA grants)	13	8,947,714
<b>Total amount leveraged in 2008-2009 by 39 county commissions (from all sources listed above)</b>		<b>\$ 58,149,505</b>

\* Leveraged funds reported do not correspond precisely with the county fiscal year due to differences between the county and federal fiscal years and various federal grant periods.

*(See explanation of sources of federal funds on the following pages)*

## **FEDERAL LEVERAGED FUNDS EXPLANATION OF SOURCES**

### Medicaid Administrative Activities claims (MAA)

Federal funds under Title 19 (Medicaid) are available to reimburse a portion of the cost of administrative activities that directly support efforts to identify and enroll individuals into Medi-Cal and to support the provision of medical services covered under the state Medicaid plan.

The MAA Program offers a way for county and local educational agencies to obtain federal reimbursement for the cost of administrative activities necessary for the proper and efficient administration of the Medi-Cal program. MAA-eligible activities include:

- Medi-Cal outreach
- Facilitating the Medi-Cal application
- Transportation of Medi-Cal eligible individuals to Medi-Cal covered services
- Contracting for Medi-Cal services
- Program planning and policy development
- Program coordination and claims administration
- Training
- General administration

The reimbursement rate under MAA is the same as the regular federal Title 19 reimbursement rate (approximately 50%) except that administrative services provided by skilled medical professionals can be claimed at an enhanced rate (75% of the cost of the service). Enhanced rates apply to nurses and other professionals who often work in Maternal and Child Health programs and other capacities within county public health departments. In most cases, county First 5 commissions fund the full cost of the initial service; the federal reimbursement then accrues to the commission or to the funded agency, depending on the local arrangement, for investment in further services.

### Targeted Case Management (TCM)

Federal funds under Medicaid are available to reimburse the cost of specialized case management services to Medi-Cal-eligible individuals in targeted high-risk populations. TCM is designed to help individuals to gain access to needed medical, social, educational, and other services. TCM services include:

- Assessment
- Plan development
- Linkage and consultation
- Assistance in accessing services
- Periodic review
- Crisis assistance planning

The reimbursement rate under the TCM program is the same as the regular federal Title 19 reimbursement rate (approximately 50%). As with the MAA claiming program, in most cases, county First 5 commissions fund the full cost of the service; the federal reimbursement then goes to the commission or the funded agency to invest in further services.

#### Early Periodic Screening, Diagnosis, and Treatment (EPSDT)

The EPSDT program is the child health component of Medicaid. Under federal law, states are required to provide services to children beyond those offered to adults. EPSDT services include screening to detect physical and mental conditions, at regular periodic intervals and whenever a problem is suspected. Screening includes a comprehensive health and developmental history, an unclothed physical exam, appropriate immunizations, laboratory tests, dental, vision, and hearing services, and health education. The treatment component of EPSDT is broadly defined to include all medically necessary services sufficient to treat an already-existing illness or injury and to prevent the development or worsening of a condition or illness.

As a result of a 1994 lawsuit, the California Department of Health Services was required to expand certain EPSDT services, including outpatient mental health services. The EPSDT program in California is now a major source of funding for mental health services for children, family therapy, crisis intervention, medication monitoring, and behavioral management modeling.

Expenditures for EPSDT mental health services grew dramatically after 1995. In 2002, in an effort to provide counties an incentive to control costs, the State imposed a 10% county share of cost, requiring counties to pay for 10% of the cost of growth in their EPSDT claims. As county budgets have tightened, First 5 commissions have expanded access to mental health and other services for young children by paying all or part of the county's share.

#### Medi-Cal Services

In some limited cases, county commissions count as leveraged dollars Medi-Cal provider payments that are available only because the commission has provided access to services in targeted communities that would not otherwise be available. Initiatives that have provided such access include mobile dental clinics, provider recruitment, transportation services, and facilities development.

#### Title IV-E Foster Care

Some commissions work with their county social services departments and schools of higher education to leverage federal Title IV-E payments to train county workers and partners who work with fostered or adopted children. They access the funds to increase the ability of current and prospective parents, staff members, and institutions to provide support and assistance to foster and adopted children.

#### ARRA Funds

Commissions were very interested in how best to assist their counties and local providers to access federal stimulus funds as they became available. Although most of the funding was drawn down in the subsequent fiscal year, late in 2008-09, commissions began processes that resulted in access to expanded Head Start and Early Head Start funds, TANF Emergency Contingency Funds, and ARRA homeless assistance funds.

### AmeriCorps/VISTA

A number of county commissions have participated in a joint AmeriCorps and VISTA programs since early in the decade. As of the 2008-09 reporting period, 16 commissions participated in the First 5 Service Corps, a project of the First 5 Association that enable commissions to draw down federal AmeriCorps funds to support Service Corps members in a variety of school readiness activities.

### Other Sources

Some commissions have been successful in applications for federal grants, such as those from the Substance Abuse and Mental Health Services Administration (SAMHSA). These are generally large partnerships with other county departments and local service providers, where First 5 funds can provide the “glue” that facilitates the partnership and fill critical gaps where no other local funds are available and services are specific to children 0 to 5.